## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000095366

Entity Name: ETM CIVIL CONSULTANTS, INC.

FILED Jan 15, 2004 Secretary of State

US

**Current Principal Place of Business: New Principal Place of Business:** 

1802 S. FISKE BLVD. 1682 W. HIBISCUS BLVD. MELBOURNE, FL 32901 105

ROCKLEDGE, FL 32955

**New Mailing Address: Current Mailing Address:** 

1802 S. FISKE BLVD. 1682 W. HIBISCUS BLVD. MELBOURNE, FL 32901 US

ROCKLEDGE, FL 32955

FEI Number: 59-3754189 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

TUCKER, PAUL TUCKER, PAUL 1802 S. FISKE BLVD. 1682 W. HIBISCUS BLVD US 105 MELBOURNE, FL 32901

ROCKLEDGE, FL 32955 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: 01/15/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

**PVPD** 

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition D/S ( ) Delete Title: PELLHUM, RICK C PELLHUM, RICK C Name: Name: 1802 S. FISKE BLVD, SUITE 105 1682 W. HIBISCUS BLVD. Address: Address:

City-St-Zip: ROCKLEDGE, FL 32955 City-St-Zip: MELBOURNE, FL 32901 US

Title: **PVPD** Title: (X) Change ( ) Addition () Delete Name: TUCKER, PAUL T Name: TUCKER, PAUL T 1802 S. FISKE BLVD, SUITE 105 1682 W. HIBISCUS BLVD. Address: Address: ROCKLEDGE, FL 32955 MELBOURNE, FL 32901 US City-St-Zip: City-St-Zip:

Title: Title: (X) Change ( ) Addition DVP () Delete DVP

SOYKA, MATTHEW A SOYKA, MATTHEW A Name: Name: 1802 S. FISKE BLVD. 1682 W. HIBISCUS BLVD. Address: Address: City-St-Zip: ROCKLEDGE, FL 32955 City-St-Zip: MELBOURNE, FL 32901 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL TUCKER **PVPD** 01/15/2004